

Customer Information

Patrick Carson
Judith Carson
7189 E Thrush Ln
Apt A
Prescott Valley, AZ 86314-1771

Date Prepared: 01/18/2021

Proposed Policy Period: 01/20/2021 to 01/20/2022

Agent Information

ASK INSURANCE SERVICES LLC
1826 W BROADWAY RD STE 51
MES, AZ 85202-1106

Phone Number: (480) 245-5048

Email: info@askinsurancegroup.com

Agent #: 132244

Call or email ASK INSURANCE SERVICES LLC to start your protection with a monthly EFT down payment of \$70.41.

PREMIUM SUMMARY

Vehicle Coverages	Premium
	\$821.00
Discounts	Included
Your total policy premium for 12 months is	\$821.00
Your total policy premium for 12 months with the Paid in Full Discount is	\$682.00

DISCOUNTS

Advance Quoting Experience

DRIVER SUMMARY

Patrick Carson

Judith Carson

VEHICLE COVERAGES	Limits / Deductibles	1998 Hond G11500c2w
Bodily Injury w/ Guest Liability	\$100,000/\$300,000	\$105.00
Property Damage Liability	\$100,000	\$44.00
Medical Payments	\$5,000	\$104.00
Uninsured Motorist Bodily Injury	\$100,000/\$300,000	\$312.00
Underinsured Motorist Bodily Injury	\$100,000/\$300,000	\$255.00
Theft Prevention Assessment	Yes	\$1.00
Total Vehicle Premium		\$821.00

Binder: Coverage is bound from the effective date listed above. The formal policy will supersede this binder. If you do not receive your policy within 30 days, please contact your independent Safeco agent.

Agency: 12/17/2020
Quote Date

Authorized Representative

Select Payment Option

Automatic Deduction (EFT)

- 1. Full Payment \$682.00 (Total Premium, no Installment Fee)
- 2. 2-Pay \$412.50 (50% down payment + \$2.00 Installment Fee)
- 3. 4-Pay \$207.25 (3 months down payment + \$2.00 Installment Fee)
- 4. Monthly Pay \$70.41 (1 month down payment + \$2.00 Installment Fee)

Recurring CC (RCC)

- 1. Full Payment \$682.00 (Total Premium, no Installment Fee)
- 2. 2-Pay \$415.50 (50% down payment + \$5.00 Installment Fee)
- 3. 4-Pay \$210.25 (3 months down payment + \$5.00 Installment Fee)
- 4. Monthly Pay \$73.41 (1 month down payment + \$5.00 Installment Fee)

Bill By Mail

- 1. Full Payment \$682.00 (Total Premium, no Installment Fee)
- 2. 2-Pay \$415.50 (50% down payment + \$5.00 Installment Fee)
- 3. 4-Pay \$210.25 (3 months down payment + \$5.00 Installment Fee)
- 4. Monthly Pay \$141.84 (2 months down payment + \$5.00 Installment Fee)

Payment Method: Debit/Credit Card (one-time charge to insured's card) Online Check (one-time deduction from insured's bank account) Agency Sweep (one-time deduction from agency's bank account) Check (use only when you have insured's check and mail to Safeco within 20 days)

Billing Account: New Existing

Billing Plan Due Date:

Agent: This acknowledges receipt of Cash Check Agent's initials _____

Mail policy to: Applicant Agent

APPLICATION INFORMATION

General Information

Reason for Policy New Motorcycle Customer to Safeco (Coverage has not been provided by a Safeco Company)

Any vehicles on this policy with more than one owner? No

Are all owners residents of the same household?

Rider Information

Patrick Carson **Permanent Resident of Household?** Yes

Birth Date 02/27/1960 **Gender** Male **Marital Status** Married

Relationship to Insured Insured **License State** Arizona **Driver's License Status** Valid

Off-road Only No

Within the last five years, how many calendar years has the rider been operating Motorcycles/Dirt bikes/ATVs or Snowmobiles? 5 or more

Judith Carson **Permanent Resident of Household?** Yes

Birth Date 09/19/1960 **Gender** Female **Marital Status** Married

Relationship to Insured Spouse **License State** Arizona **Driver's License Status** Valid

Off-road Only No

Within the last five years, how many calendar years has the rider been operating Motorcycles/Dirt bikes/ATVs or Snowmobiles? 0

Vehicle Operation

	1998 HOND
Model Year	1998
Make	HOND
Model	GL1500C2W VALKYRIE
VIN	1HFSC3408WA102604
Engine Size/CCs	1500
Territory	001
Symbol	7
Garaged Location	1 - 7189 E Thrush Ln
Garaging Discount? (Applies only with Comp Coverage)	No
Corporate Owned	No
Used for business purposes	No

A Liberty Mutual Company

Used for racing/speed contests No
 Has vehicle been converted or registered for street legal use? _____

Customer Information

Name Patrick Carson
Residence Type Rented Apartment

Previous Policy Information

Current Cycle Insurance Status No Insurance - First Owned Vehicle
Prior Cycle Insurance Carrier
Carrier Name (if not in list)
Policy Expiration/Lapse Date
Number of Months with this Carrier

Accidents/ Violations (We only use driving record as allowed by your state for rating and underwriting.)

Was driving record (accidents, fault and non-fault, comprehensive losses, and violations) indicated on the application or quote for insurance?

Accidents Yes
Violations Yes

Incident 1

Name Patrick Carson **Date** 03/29/2020
Type of Violation At-fault Accident **Bodily Injury Amount Paid** 0
PD Amount Paid 2801
Remarks CLUE At Fault Accident
Violation Type

Incident 2

Name Patrick Carson **Date** 08/10/2017
Type of Violation At-fault Accident **Bodily Injury Amount Paid** 100000
PD Amount Paid 9975
Remarks made a left into the drivers side of another vehicle
Violation Type

Incident 3

Name Judith Carson **Date** 02/24/2020
Type of Violation Comprehensive Only **Bodily Injury Amount Paid** _____
PD Amount Paid 65
Remarks CLUE Comprehensive Claim

Violation Type

Incident 4

Name Patrick Carson	Date 01/03/2018
Type of Violation Violation	Bodily Injury Amount Paid _____
	PD Amount Paid _____

Remarks Suspension of License**LexisNexis Description** SUSPENSION

Garaged Locations

	Location 1
Address Line 1	7189 E Thrush Ln
Address Line 2	Apt A
City	Prescott Valley
State	Arizona
ZIP Code	86314-1771
County	Yavapai
